Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10830112

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			92			•			FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			92 mir	nus 20=	•	2		X\$ 9=		OR	X\$18=	1296	
INDEPENDENT CLAIMS			mi ع	nus 3 =	* (			X43=		OR	X86=	172_	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	( )	
* If	the difference	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	2238		
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
(Column 1)				(Colun		(Column 3)	7	SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	-	=		X\$ 9=	•	OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						,	+145=		OR	+290=		
1/	, 20,39,55,74,							TOTAL ADDIT, FEE			TOTAL ADDIT. FEE		
			ODN. FEE			ADDII.1 CE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	· _		] [	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	01.4114		1 [	X43=	·	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER . USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<b>—</b>	=	▍┞	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			+290=		
* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.											TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEOR ADDI													
		nber Previously Pai					er foun	id in the app	ropriate box	in col	umn 1.		